BEFORE THE INSURANCE COMMISSIONER OF THE STATE OF WASHINGTON

In the Matter of the Application regarding the Conversion and Acquisition of Control of Premera Blue Cross and its Affiliates,

Docket No. G02-45

FOURTH ORDER: RULING ON MOTIONS TO INTERVENE

The organizations listed below have filed motions to intervene in the adjudicative hearing being conducted to review the proposal of Premera, a holding company, and certain of its affiliates to convert to for-profit entities. Premera, the Office of the Insurance Commissioner (OIC) Staff, and the petitioning interveners have filed memoranda on the issue of intervention, which I have considered. The petitioning interveners are as follows:

Premera Watch Coalition, which consists of Washington Citizen Action, Welfare Rights Organizing Coalition, American Lung Association of Washington, Northwest Federation of Community Organizations, Northwest Health Law Advocates, Service Employees International Union Washington State Council, The Children's Alliance, Washington Academy of Family Physicians, Washington Association of Churches, Washington Protection and Advocacy System, and Washington NOW;

Washington Association of Community and Migrant Health Centers, which represents 36 health care centers located in 24 Washington counties;

The Hospital Associations, which consists of the Washington State Hospital Association and the Washington Public Hospital Districts;

University of Washington School of Medicine, whose components consist of the School itself, University of Washington Medical Center, Harborview Medical Center, the Association of University Physicians d/b/a University of Washington Physicians, and the University of Washington Physicians Network;

The Washington State Medical Association, which consists of 8,800 members who provide healthcare services to Washington citizens;

The University of Alaska, which represents itself as one of the largest employers in Alaska whose health insurance is administered by Premera, and which, as an educational institution, provides degrees in healthcare-related occupations; and

United Way of Anchorage, John Garner (a disabled individual), and Anchorage Neighborhood Health Center, all of whom have expressed an interest in any proceeds that may result from a conversion for themselves or the individuals they serve.

Pursuant to RCW 48.31B.015(4)(b) and 48.31C.030(4), "any person whose significant interest is determined by the commissioner to be affected" by the proposed transaction "may present evidence, examine and cross-examine witnesses, and offer oral and written arguments, and in connection therewith may conduct discovery proceedings in the same manner as is allowed in the superior court of this state." Premera objects to the intervention of the individual and organizations that have filed motions on the ground that they have not satisfied the legal standard for having a "significant interest." In addition, Premera argues that intervention by multiple persons will impede the orderly operation of the hearing and unduly delay a decision in the matter. The OIC Staff does not oppose the motions to intervene, but suggests that certain conditions and limitations be placed on the interveners to ensure an efficient hearing. In particular, the OIC Staff suggests that the interveners be grouped in two classes, namely healthcare providers and healthcare consumers, with each group led by an

"attorney-in-charge." The petitioning interveners generally agree to cooperate, but argue that the groupings suggested by the OIC Staff are too narrow and do not reflect the potential for conflicts of interest because of the divergent views of some of the interveners on certain issues.

For the reasons stated below, I am granting the motions to intervene; although, intervention will be subject to certain conditions and limitations. As discussed below, I have determined that the interveners represent significant interests that will be affected by a conversion of Premera. With respect to those interests, the interveners will offer information and a perspective that may very well differ from Premera and the OIC Staff. In addition, the interveners will bring a certain expertise relevant to their positions as providers and consumers of healthcare.

The bounds of intervention, however, are not limitless. The issues each intervener will be permitted to discover and offer evidence on are constrained by the following three requirements: (1) the issue must be relevant to the statutory criteria I am required to consider; (2) the issue must have been articulated by the intervener in its motion to intervene; and (3) the intervener must have established to my satisfaction that it can offer information or expertise different or beyond that being offered by Premera or the OIC Staff. In addition, I intend to enforce procedures for discovery and the hearing that will ensure a fair process, but also an efficient one that avoids redundancy and unnecessary delay.

In the interest of efficiency for all involved, I am requiring that the various interveners combine into five groups. Each group shall appoint a lead attorney who will speak and act for the group. Each group shall be treated as a single and separate party for the purposes of discovery, briefing, presentation of evidence, examination and cross-examination of witnesses, argument, and service of papers. The groups are as follows: (1) **Premera Watch Coalition**, which will include all of the organizations that filed a motion to intervene under

that name and the Washington Association of Community and Migrant Health Centers;¹ (2) **The Hospital Association**; (3) **Washington State Medical Association**; (4) **The Alaska Interveners**, which will include the University of Alaska, United Way of Anchorage, John Garner, and Anchorage Neighborhood Health Center; and (5) **The University of Washington School of Medicine**.²

At the outset, it may be useful to discuss some of the issues raised by the interveners that are not proper subjects for this proceeding. First, I will not consider whether any particular intervener ultimately should be a recipient of proceeds from the conversion, should it be approved. Nor will this proceeding resolve the *specifics* of the mission and operation of any foundation created for the purpose of administering the proceeds of a conversion. It is the role of the Attorney General pursuant to the Nonprofit Corporation Act, ch. 24.03 RCW, to review a plan of distribution of the assets of a dissolving nonprofit corporation. Under the law the Attorney General must approve the transfer of any assets and is responsible for ensuring that those assets are used for the public benefit or charitable purposes as required by RCW 24.03.225. My responsibility intersects with that of the Attorney General to the extent that I must ensure, if the conversion is approved, the fair value of the assets of the corporation is available to be used for those purposes defined by the law.

¹ The Washington Association of Community and Migrant Health Centers and the Premera Watch Coalition, in the briefing filed on intervention, agreed to join together an as intervening group.

² It would appear that the University of Washington has a commonality of interest and perspective with The Hospital Associations. However, the entities that comprise The Hospital Associations recently filed an action in King County Superior Court against Premera. The complaint alleges that, because of past agreements between certain hospitals and Premera, Premera is not permitted to convert to a for-profit entity; and if it does, the proceeds of the conversion must inure to the benefit of those hospitals. It is unclear at this time what, if any, effect the lawsuit may have on these proceedings. It also appears possible that The Hospital Associations' interests may be adverse not only to Premera but also to the other interveners. The School of Medicine has represented that it plans to limit its participation and does not intend to conduct full discovery. Because of the potential conflict of interest and the University of Washington School of Medicine's limited participation, I am allowing it to stand on its own as an intervener.

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Furthermore, it should be noted that the interests of the Alaska Interveners relevant to this proceeding is limited by the authority and duties granted to me under Washington law. In their motions, the Alaska Interveners ask that this Washington proceeding be the forum to address and protect all of their interests that may be affected by a conversion. However, under Washington law my jurisdiction and statutory obligations may not extend to the outer limits of these interveners' interests. As the primary regulator of Premera, a domestic Washington company, I am responsible for ensuring that the company, regardless of the location of its business, is financially sound. As the Insurance Commissioner for the state of Washington, I am responsible for ensuring that Premera operates in accordance with this state's laws. Washington's Holding Company Act, chs. 31B and 31C RCW, gives me the responsibility to make sure the interests of Washington subscribers and the insurance-buying public are protected whenever there is an acquisition of a domestic carrier, as is occurring in this case through a conversion. While I am very interested in hearing from the Alaska Interveners how they believe a conversion may affect the operations of Premera and the health insurance market in Alaska, the interests of the Alaska Interveners and my statutory obligations may not always be coextensive. This proceeding cannot resolve for the Alaska Interveners issues that are unique to Alaska and do not come within my jurisdiction or obligations under Washington state law

However, my statutory review does encompass issues that affect significant interests of the interveners. The interveners represent a broad range of persons who are either consumers or providers of healthcare. The intevenors represent institutional providers, such as hospitals and clinics, and individual providers, such as physicians. The consumer representatives include current Premera subscribers and individuals for whom health insurance is currently not available. The Premera Watch Coalition has stated that it will provide expert opinion on the impact of the conversion on healthcare generally. The Hospital Associations intend to represent their interests surrounding the problem of uncompensated

care its members are obligated to cover when insurance is not available. The Washington Physicians Association is concerned about reimbursement levels to providers from Premera, which could have an affect on the adequacy of provider networks serving the insured public. The Alaska Interveners interests are similar in nature to the other interveners; however, they will present information about the affects on the Alaska health insurance market that may be relevant to my review and will not be provided by another party.

Premera argues that the petitioning intervernors have not met the legal standard for intervention. The standard to be applied in this case is specifically set forth in the Holding Company Act (the "Act"), RCW 31B.015(4)(b) and 31C.030(4).³ The Act gives me the authority to determine if a person's significant interest is affected by an acquisition. If so, that person has the right to conduct discovery and participate in the hearing. The central question is what constitutes a "significant interest" under the Holding Company Act. There is no case that has interpreted this particular statutory language. The meaning of this phrase cannot be discerned in a vacuum. It must be considered in the context of the transaction being reviewed and the asserted interests of the persons seeking intervention.

The transaction under review is like no other that has been conducted under Washington's Holding Company Act. The result of the acquisition is for Premera to convert from a nonprofit insurer to a publicly held for-profit insurer. It is acknowledged that Premera has a substantial part of the health insurance market in both Washington and Alaska and that it has existing contracts with a large percentage of the healthcare providers in both states. Furthermore, it is asserted by the interveners that, as a nonprofit insurer, Premera has played and could continue to play a unique role in providing insurance to segments of the population

³ The Holding Company Act does not use the words "intervention" or "intervener." The petitioners and the parties have adopted this nomenclature. For ease of reference I am using the same language employed by them. However, the petitioners' and parties' rights with respect to participation in this proceeding are governed by the language of RCW 31B.015(4)(b) and 31C.030(4).

that for-profit insurers avoid. If Premera retreats from some parts of the insurance market, as interveners allege could happen, interveners assert there will be an affect on the interests of those intervening organizations that provide healthcare services to the uninsured.⁴

RCW 48.31C.030 requires me to consider criteria that are relevant to the interests of the interveners in either maintaining or obtaining insurance and in having networks of providers available to provide the services covered by insurance. The legislature has directed me to consider, among other things, (1) whether the public will benefit from the economies of scale and resources that may occur as a result of the conversion, (2) whether the conversion will increase or prevent significant deterioration in the availability of health care coverage, (3) whether the future business plans of Premera are unfair and unreasonable to subscribers and not in the public interest, and (4) whether the conversion is likely to be hazardous or prejudicial to the insurance-buying public. On these issues, the interveners have established that they can present information, a perspective, and expertise different from or broader than that provided by the OIC Staff or Premera. They have satisfied me that their interests related to theses issues are significant; therefore, they should be allowed to participate in these proceedings.

All of the interveners, either expressly or by implication, also have indicated an interest in the valuation of the assets of Premera. Valuation appears to be relevant to the interveners' core concerns to the extent that there is a negative impact, if any, on the availability and affordability of health insurance as a result of the conversion. Any negative impact may be offset by the availability of conversion proceeds directed to the affected segments of the health insurance market. Theoretically, greater proceeds could result in a

⁴ I am not making any findings as to whether the petitioning interveners' allegations regarding Premera's possible future conduct or the consequences of a conversion are true. And even assuming they are true, I am not drawing any conclusion as to whether that would be cause to disapprove the conversion. The focus of the intervention analysis is whether the petitioners have significant interests that will be affected by the transaction that would allow them to participate in the proceedings under RCW 31.015(4)(b) and 31C.030(4).

greater opportunity to offset negative impacts. However, none of the interveners have shown that they possess any specialized expertise in valuation or intend to retain such expertise. The OIC Staff has retained an investment banker and accounting firm to address the issue of valuation and to prepare a report on the topic. The report will made available to the interveners, as well as the public. In addition, the OIC Staff is conducting a financial examination of Premera, the results of which will also be made available. The interveners will be permitted to discover the bases of any opinions or conclusions of the OIC Staff and its experts on these issues, as well as the bases of any opinions or conclusions of Premera. However, I caution that on this issue I intend to place certain limitations on the interveners. Each intervening group is not going to be permitted to conduct its own financial examination of Premera. I am concerned that such an undertaking by each intervener group will unduly delay the review process without providing expertise or information beyond or different than what the OIC Staff will have spent considerable time developing.

WHEREFORE, it is this 10th day of February, 2003, ORDERED, that (1) Each intervener group identify a lead attorney and inform me and all parties of the name, address, telephone number, fax number, and e-mail address by February 13, 2003; (2) By February 21, 2003, the lead attorneys will meet and discuss preparation of expert reports, a discovery schedule, discovery procedures, availability of documents, adjudicative hearing schedule, and any other matters the lead attorneys deem relevant to the hearing and its procedures; (3) On or before February 27, 2003, the lead attorneys shall submit to me a draft of a joint proposal addressing the matters in item 2. The draft should indicate where there is agreement by the lead attorneys and where there is not agreement; (4) On or before February 27, 2003, Premera and the OIC Staff shall submit a status report on the progress of the ongoing data and information collection; and (5) On March 3, 2003, a pre-hearing conference will be held at which all lead attorneys shall be present and prepared to discuss the draft joint proposal. The hearing will be held from 1:00 to 4:00 p.m. at the Tumwater City Council Chambers, City

1	Hall, 555 Israel Road, Tumwater, WA 98501. A pre-hearing order will be issued after the
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6	INSURANCE COMMISSIONER
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